## STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)			
II. Name of lobbyist's part	tnership, firm or coi	rporation, if any:	
Diamed Describered	All 1 Action Fund		
Planned Parenthood I	NH ACTION FUND nership, firm or corporation)		
(Name of parti	leiship, initi of corporation)		
III. Name of Client			Date
Political Contributions			
			ter 664 paid on behalf of the
client/lobbyist and lobbying	g firm, indicate the fo	ollowing:	
	- Alaka (17.5		and the same of th
Full name of candidate: _S			
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate i	s Seeking Charles Canada
Amount of conditions =	100.00	Office Candidate is Seeking State Senate	
		ove for amount of contrib	ution. If the actual cost is not known
enter an estimated value and t	the word "estimate."		
enter an estimated value and t	the word "estimate."		
Full name of candidate:	the word "estimate."  (Last Name)	(First Name)	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kin	(Last Name)  Ind contribution, provide tribution on the line abo	(First Name) Office Candidate is	(Middle Name/Initial) s Seeking ds or services provided, and enter the
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kin actual cost of the in-kind cont	(Last Name)  Ind contribution, provide tribution on the line abo	(First Name) Office Candidate is	(Middle Name/Initial) s Seeking ds or services provided, and enter the
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t	(Last Name)  Ind contribution, provide tribution on the line abo	(First Name) Office Candidate is	
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kin actual cost of the in-kind cont	(Last Name)  (Last Name)  Indicontribution, provide tribution on the line abothe word "estimate."	(First Name) Office Candidate is a description of the good ove for amount of contrib	(Middle Name/Initial)  s Seeking  ds or services provided, and enter the ution. If the actual cost is not known
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t	(Last Name)  Ind contribution, provide tribution on the line abo	(First Name) Office Candidate is	(Middle Name/Initial) s Seeking ds or services provided, and enter the

If the contribution is an in-kind contribution, provide a description of the go actual cost of the in-kind contribution on the line above for amount of contre enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contributions on sepa	trate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or a is true and complete to the best of my knowledge and belief.	ffirm that the foregoing information
(Signature of lobbyist)	10- 24.17 (Date)
(Signature of lobbyist)  Kuyla M. Mantyanen  (Print Name of lobbyist)	